## APPENDIX A

## INDIANA STATE DEPARTMENT OF HEALTH LABORATORY RESOURCE CENTER ENVIRONMENTAL LABORATORY

# INFORMATION AUDIOVISUAL PROGRAMS FOR LOAN

#### AV LOAN PROGRAM

The Laboratory Improvement Office of the Environmental Laboratory maintains a library of audiovisual and educational training aids which may be borrowed by laboratory and other medical personnel in Indiana. Materials have been contributed by the Centers for Disease Control, provided by a joint program between ISDH and the IU Medical Center, and procured from training program suppliers.

#### **USE OF THE LIST**

- 1. The list of loan sets is subdivided into categories according to type of program and audiovisual equipment required. Each program is identified by a "Set No.", complete title and "Key Title Words".
- 2. If the Set No. has two numbers separated by a hyphen, the first number indicates the year produced or updated and the second number the numerical sequence. For the other programs, the year is recorded after the title. Since tapes, slides and handouts may be prepared or updated at different times, materials of any one program may show different year dates.
- 3. Approximate times for programs will be found at the beginning of the list category or after the individual title.

#### **LOAN POLICIES**

- 1. An individual, designated by name, must assume responsibility for borrowing and returning sets.
- 2. Loan requests may be made by letter or telephone.
- 3. Materials are loaned for a maximum period of two weeks.
- 4. No more than 2 sets may be sent at any one time.
- 5. Sets may be picked up or they will be shipped prepaid. Return shipments must be prepaid and insured by the borrower.
- 6. Since only a few programs are stocked in multiples, requests should be made as far in advance as possible of the required dates.

## **LOAN PROCEDURES**

- 1. Make loan requests by "Set No." and "AV Title" or "Key Title Words".
- 2. Use the request/schedule form for written requests. Additional copies of this form are available on request.

- 3. Provide the name of the person assuming responsibility for the materials, the complete address, direct telephone number and dates the programs are desired.
- 4. State whether materials will be "pick up" or a shipment. (Shipment is by UPS unless otherwise necessary.)
- 5. Please return loan materials promptly so the next scheduled borrower may receive them on time.

6. Direct inquiries and requests to:

**WRITTEN** Laboratory AV Loan Program

Laboratory Improvement Office Indiana State Department of Health

P.O. Box 1964

Indianapolis IN 46206-1964

**TELEPHONED** Laboratory Improvement Office

317/233-8071